



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Anthony et al.

Serial No.: 09/973,853

Case No.: 20757Y

Art Unit:

1624

Filed: October 10, 2001

Examiner:

Coleman, Brenda L.

For: AZA- AND POLYAZA-NAPHTHALENYL  
CARBOXAMIDES USEFUL AS INTEGRASE  
INHIBITORS

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

AMENDMENT AFTER FINAL REJECTION

Sir:

This communication is the second response to the Office Action mailed July 26, 2004, which set a three-month period for response that expires on October 26, 2004. A first response was mailed August 16, 2004, for which the Advisory Action mailed August 31, 2004 was received in reply.

Please amend the above-identified application as follows:

Amendments to the claims are shown in the listing of the claims that begins on page 2 of this paper.

Remarks begin on page 68 of this paper.

10/26/2004 MAHME1 0000065 132755 09973853  
01 FC:1201 176.00 DA

**EXPRESS MAIL CERTIFICATE**  
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10/25/04

PATENT  
CASE NO. 20757YAF #  
JFW

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450In re application of: ANTHONY ET AL.Serial No. 09/973,853Filed October 10, 2001Group Art Unit 1624Examiner Coleman, Brenda L.For: AZA-AND POLYAZA-NAPHTHALENYL CARBOXAMIDES  
USEFUL AS INTEGRASE INHIBITORS

Transmitted herewith is an amendment in the above-identified application.

☐ No additional fee is required.☒ The fee has been calculated as shown below.

## CLAIMS AS AMENDED

(1)	(2) Claims remaining after amendment	(3)	(4) Highest Number Previously Paid For	(5) Present Extra	(6) Rate	(7) Additional Fee
Total Claims	* <u>23</u>	-	** <u>36</u> =	<u>0</u> X	\$18	= <u>0.00</u>
Independent Claims	* <u>8</u>	-	*** <u>6</u> =	<u>2</u> X	\$88	= <u>176.00</u>
Multiple Dependent Claims					\$300 ****	= <u>        </u>
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						176.00

\* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

\*\* If the "Highest Number Previously Paid For" in this space is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" in this space is less than 3, write "3" in this space.

\*\*\*\* Add this fee only if application is amended to include multiple dependent claims (regardless of number) and no multiple dependent claims were originally filed.

Charge \$ 176.00 to Deposit Account No. 13-2755. Please charge any additional fees or credit overpayment to Deposit Account No. 13-2755. A duplicate copy of this sheet is enclosed.

Respectfully,

Kenneth R. Walton

By: Kenneth R. Walton

Attorney          for Applicant(s)Reg. No. 32,951

MERCK &amp; CO., INC.

Patent Dept., RY60-30

P.O. Box 2000

Rahway, N.J. 07065-0907

(732) 594-3462

Date: October 22, 2004

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